
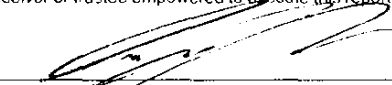


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		FILED 99 MAR 16 AM 9:36 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L93000000114		1a. Principal Place of Business Address	
TARGON INVESTMENT COMPANY, L.C. 415 PINECREST CT. CAPE CORAL FL 33904				4937 TRITON CT W. CAPE CORAL FL 33904	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/05/1993	
City & State		City & State		3a. State of Formation	
Zip		Country		FL	
				4. FEI Number	
				65-0426683	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report	
				04/20/1998	
				6. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office	
EITTENBERGER, MONIKA 415 PINECREST CT. CAPE CORAL FL 33904				Name Street Address (P.O. Box Number is Not Acceptable) 200002819192 Suite, Apt. #, etc. -03/26/99-01005-022 ****188.75 ****188.75 City FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____				DATE _____	
10. Title					
Managing Members/Managers		Business Street Address		City, State and Zip Code	
MGRM	VOLKER, WENDLAND	IM HOEHNGESGARTEN 35		514 OVERATH GERMANY	
MGRM	GUENTHER, MAND	BAHNOFSTR 51491		UNTERESCHBACH GERMAN	
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE:  Guenther Mand 2-25-99 941-540-9205					